

# CAMPAIGN FINANCIAL REPORT

**RECEIVED**

*(All of the information in this report is public information)*

Name of candidate, committee or corporation Nora Slawik

Office sought or ballot question Maplewood Mayor District \_\_\_\_\_

JAN 26 2017

**CITY OF MAPLEWOOD**

Type of report \_\_\_\_\_  Candidate report  
 \_\_\_\_\_ Campaign committee report  
 \_\_\_\_\_ Association or corporation report  
 \_\_\_\_\_ Final report

Period of time covered by report:

from 4/31/16 to 4/31/16

### CONTRIBUTIONS RECEIVED

Give the total for all contributions received during the period of time covered by this report. Contributions should be listed by type (money or in-kind) rather than contributor. See note on contribution limits on the back of this form. Use a separate sheet to itemize all contributions from a single source that exceeded \$100 during the calendar year. This itemization must include name, address, employer or occupation if self-employed, amount and date for these contributions.

CASH	\$	<u>0</u>	TOTAL CASH-ON-HAND	\$	<u>1005.27</u>
IN-KIND	+	<u>0</u>			
TOTAL AMOUNT RECEIVED	=	<u>0</u>			

### DISBURSEMENTS

Include the amount, date and purpose for all disbursements made during the period of time covered by report. Attach additional sheets if necessary.

Date	Purpose	Amount
	<u>N/A</u>	
	<b>TOTAL</b>	

### CORPORATE PROJECT EXPENDITURES

Corporations must list any media project or corporate message project for which contribution(s) or expenditure(s) total more than \$200. Submit a separate report for each project. Attach additional sheets if necessary.

Project title or description \_\_\_\_\_

Date	Purpose	Name and Address of Recipient	Expenditure or Contribution Amount
	<u>N/A</u>		
		<b>TOTAL</b>	

I certify that this is a full and true statement.

Nora Slawik

Signature

Date

Printed Name Nora Slawik Telephone 651-738-1099 Email (if available) noraslawik@comcast.net

Address 1756 East Shore Drive, Maplewood, MN 55109

Report Office Name For Office Use Only: